

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	G.C.		09-06-01
O.I.P.E. CLASSIFIER			9-13-01
FORMALITY REVIEW	ST	1021	10/04/01
RESPONSE FORMALITY REVIEW	3/1	809	3-16-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2/2/01
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	0	0	
6	0	0	
7	0	0	
8	0	0	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	0	0	
13	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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2/2/01  
 10/04/01  
 851  
 03/16/02